

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T.D.		5/6/00
O.I.P.E. CLASSIFIER			5/1/00
FORMALITY REVIEW	70611	7	6/15/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final	
Original	5/6/00
1	5/12/00
2	5/16/00
3	
4	
5	5/11/00
6	✓ ✓ ✓
7	—
8	
9	
10	✓ ✓
11	✓ ✓
12	✓ ✓
13	
14	✓ ✓
15	✓ ✓
16	✓ ✓ ✓
17	
18	
19	
20	✓ ✓
21	✓ ✓
22	
23	
24	
25	✓
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27	
28	
29	
30	
31	✓
32	
33	
34	
35	✓ ✓ ✓
36	✓ ✓ ✓
37	
38	
39	
40	✓ ✓
41	✓
42	✓
43	
44	
45	
46	
47	
48	
49	✓
50	✓

Claim	Date
Final	
Original	5/6/00
51	✓
52	
53	
54	
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56	
57	
58	
59	
60	✓
61	==
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68	
69	✓
70	✓
71	✓
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80	✓
81	✓
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97	
98	
99	✓
100	==

Claim	Date
Final	
Original	5/6/00
101	
102	
103	
104	
105	
106	
107	
108	
109	
110	✓
111	✓
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119	✓
120	✓
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If more than 150 claims or 10 actions
staple additional sheet here

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